F06000004756

| (Requestor's Name) |
|------------------------------------|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| □ Copies Certificates of Status |
| al Instructions to Filing Officer: |
| |
| |
| |
| |
| |
| Office Use Only |



600402807496

2023FEB 21 AM 9: 07



A. BUTLER FEB 2 2 2023 CORPORATION SERVICE COMPANY 1201 Hays Street

1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

| ACCOUNT NO. : 12000000195 |
|---|
| REFERENCE : 504697 8401817 |
| AUTHORIZATION : |
| COST LIMIT : \$735,00 |
| ORDER DATE : February 16, 2023 |
| ORDER TIME : 9:06 AM |
| ORDER NO. : 504697-007 |
| CUSTOMER NO: 8401817 |
| |
| CHANGE OF AGENT |
| |
| NAME: TROUTMAN & ASSOCIATES, INC. |
| |
| |
| PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: |
| CERTIFIED COPY XX PLAIN STAMPED COPY |
| CONTACT PERSON: Eyliena Baker |

EXAMINER'S INITIALS:

STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR CORPORATIONS

| statement of cha | provisions of sections 607.0302, 617.03 inge is submitted for a corporation orga ir to change its registered office or regis | nized under the lav | vs of the State of_ | KY | <u> </u> |
|---|---|--|-----------------------------------|----------------------|--------------------------------|
| 1. The name of | the corporation: TROUTMAN & ASSOC | IATES, INC. | | | |
| | office address: 1309 BLUEGRASS PK | | Y 40031 | | |
| 3. The mailing a | address (if different): | | | | |
| | poration/qualification: 07/17/2006 | | | | |
| | d street address of the current registered timent of State: (If resigned, enter resign | | d office on file w | ith the | |
| | C T CORPORATION SYSTEM | | | _ | |
| | 1200 SOUTH PINE ISLAND ROAD | | | _ | |
| | PLANTATION, FL 33324 | | | | |
| 6. The name and (if changed): | I street address of the new registered age Corporation Service Company | ent (if changed) and | d/or registered of | 2023 FEB 2 | ****\ * * * ** |
| | - · · · · · | | | <u></u> | 1 |
| | 1201 Hays Street P.O. Bo | ov NOT acceptable | | | |
| | Tallahassee | FL | 32301 | 2011 2011 2016 | 2 |
| The street addre as changed will | ess of its registered office and the street be identical. | t address of the bu | siness office of it | | |
| Such change wa authorized by th | as authorized by resolution duly adopte ne board, or the corporation has been no | ed by its board of dotified in writing o | lirectors or by an of the change. | officer so | |
| _ Xiel | 2 agnie | Jill Cilmi | | Vice Pres | sident |
| I hereby accept I further agree to of my duties, an document is hei corporation has | the appointment as registered agent an to comply with the provisions of all sta d I am familiar with and accept the ob ng filed merely to reflect a change in the been notified in writing of this change | nd agree to act in t tutes relative to the ligation of my possible registered office | e proper and con | unlete nerfo. | rmance • if this hat the |
| Corporation By: L) M | n Service Company | 02/20/2023 | | | |
| | nature of Registered Agent | · · · · · · · · · · · · · · · · · · · | Date | | |
| If signing on be | half of an entity: | | | | |
| Grace E. Kirby, . | Asst. Vice President | | | | |
| Т | oped or Printed Name | | | | |

* * * FILING FEE: \$35.00 * * *